

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : 10/707,759 Examiner : Dang GAU : 2818

From: PAP Location: (IDC) FMF FDC Date: 9/6/05

Tracking #: EPM 10/707,759 Week Date: 5/9/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>1/9/04</u>	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>4/29/05</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Original claim 16 depends on original claim 16.

Dme

Thank you

[XRUSH] RESPONSE: original claim 16 depends on original claim 15. (see claim 16 attached)

INITIALS: PP

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04